

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
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7590 12/29/2004

Robert Desmond
 Honeywell International, Inc.
 Law Dept. AB2
 P.O. Box 2245
 Morristown, NJ 07962



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Paul D. Amrozowicz (Depositor's name)
 (Signature)
 3/18/05 (Date)

03/18/2005 MGBREN2 00000021 502091 10757124

01 FC:1501 1400.00 DA
 02 FC:1504 APPLICATION MODA
 10757,124 01/14/2004 Darrell W. Horner H0006198-1070 3820

TITLE OF INVENTION: CABIN PRESSURE CONTROL METHOD AND APPARATUS USING ALL-ELECTRIC CONTROL WITHOUT OUTFLOW VALVE POSITION FEEDBACK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	03/29/2005
EXAMINER	ART UNIT	CLASS-SUBCLASS			
JOYCE, HAROLD	3749	454-074000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Honeywell International, Inc.

Morristown, NJ

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☐ Advance Order - # of Copies

4b. Payment of Fee(s):

- ☐ A check in the amount of the fee(s) is enclosed.
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2091 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature
 Typed or printed name Paul D. Amrozowicz

Date 3/18/05
 Registration No. 45,264

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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FACSIMILE TRANSMITTAL SHEET

TO:	FROM:
Mail Stop ISSUE FEE	Paul D. Amrozowicz, Reg. No. 45,264
COMPANY:	DATE:
USPTO	FRIDAY, MARCH 18, 2005
FACSIMILE NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
703.746.4000	2
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
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NOTES/COMMENTS:

**FORMAL COMMUNICATION INTENDED FOR
ENTRY**

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